

10-08

A DECLARATORY RESOLUTION designating a "Residentially Distressed Area" under I.C. 6-1.1-12-1 for property commonly known as 120 Esmond Street.

WHEREAS, Petitioner has duly filed its petition dated September 17, 1991, to have the following described property designated and declared a "Residentially Distressed Area" under Division 6, Article II, Chapter 2 of the Municipal Code of the City of Fort Wayne, Indiana, of 1974, as amended, and I.C. 6-1.1-12.1, to wit:

W 45 Lot 46 Bass 6th Addition

said property more commonly known as 120 Esmond Street.

WHEREAS, said project will be rehabilitated; and

WHEREAS, the total estimated project cost is \$7,000.00; and

WHEREAS, it appears that said petition should be processed to final determination in accordance with the provisions of said Division 6.

NOW, THEREFORE, BE IT RESOLVED BY THE COMMON COUNCIL OF THE CITY OF FORT WAYNE, INDIANA:

SECTION 1. That, subject to the requirements of Section 6, below, the property hereinabove described as hereby designated and declared a "Residentially Distressed Area" under I.C. 6-1.1-21.1. Said designation shall begin upon the effective date of the Confirming Resolution referred to in Section 6 of this Resolution and shall continue for two (2) years thereafter. Said designation shall terminate at the end of that two year period.

SECTION 2. That upon adoption of the Resolution:

(a) Said Resolution shall be filed with the Allen

1 County Assessor;

2 (b) Said Resolution shall be referred to the Committee
3 on Finance and shall also be referred to the
4 Department of Economic Development Requesting a
5 recommendation from said department concerning the
6 advisability of designating the above designated
7 area a "Residentially Distressed Area";

8 (c) Common Council shall publish notice in accordance
9 with I.C. 6-1.1-12.1-2.5 and I.C. 5-3-1 of the
10 adoption and substance of this Resolution and
11 setting this designation as a "Residentially
12 Distressed Area" for public hearing;

13 (d) If this Resolution involves an area that has
14 already been designated an allocation area under
15 I.C. 36-7-14-39, then the Resolution shall be
16 referred to the Fort Wayne Redevelopment
17 Commission and said designation as a
18 "Residentially Distressed Area" shall not be
19 finally approved unless said Commission adopts a
20 resolution approving the petition.

21 SECTION 3. That, said designation of the
22 hereinabove described property as a "Residentially
23 Distressed Area" shall apply to a deduction of the assessed
24 value of real estate improvements.

25 SECTION 4. The County Commissioners will transfer
26 ownership of the property to Housing and Neighborhood
27 Development Services, Inc. (HANDS). HANDS will then
28 transfer ownership to Charles C. Vanyo who will then
29 rehabilitate the property and rent it to low and moderate
30 income tenants.

31 SECTION 5. The current year approximate tax rates
32 for taxing units within the City would be:

(a) If the proposed project is not undertaken, the

1 approximate current year tax rates for this site would be
2 \$7.595561/\$100.

3 (b) If the proposed project is undertaken and no
4 deduction is granted, the approximate current year
5 tax rate for the sit would be \$7.595561/\$100 (the
6 change would be negligible).

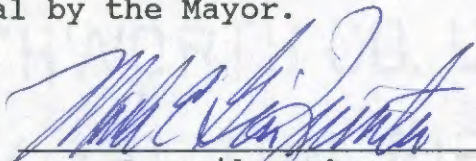
7 (c) If the proposed project is undertaken and a
8 deduction of \$8,000 is assumed, the approximate
9 current year tax rate for the site would be
10 \$7.595561/\$100 (the change would be negligible).

11 SECTION 6. That this Resolution shall be subject
12 to being confirmed, modified and confirmed or rescinded
13 after public hearing and receipt by Common Council of the
14 above described recommendations and resolution, if
15 applicable.

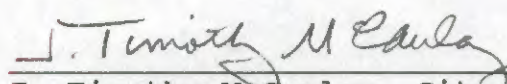
16 SECTION 7. Pursuant to I.C. 6-1.1012.1, it is
17 hereby determined that the deduction from the assessed value
18 of the new construction (or rehab) shall be for a period of
19 5 years.

20 SECTION 8. The benefits described in the
21 Petitioner's statement of benefits can be reasonably
22 expected to result from the project and are sufficient to
23 justify the applicable deductions.

24 SECTION 9. That this Resolution shall be in full
25 force and effect from and after its passage and any and all
26 necessary approval by the Mayor.

27 
28 Council member

29 APPROVED AS TO FORM
30 AND LEGALITY

31 
32 J. Timothy McCaulay, City Attorney

Read the first time in full and on motion by _____, seconded by _____, and duly adopted, read the second time title and referred to the Committee on _____ (and the City Plan Commission for recommendation) and Public Hearing to be held after due legal notice, at the Council Conference Room 128, City-County Building, Fort Wayne, Indiana, on _____, the _____ of _____, 19____, at _____ o'clock _____ M., E.S.

DATED: _____

SANDRA E. KENNEDY, CITY CLERK

Read the third time in full and on motion by Henry, seconded by Sandra E. Kennedy, and duly adopted, placed on its passage. PASSED 10-8-91 by the following vote:

	AYES	NAYS	ABSTAINED	ABSENT
TOTAL VOTES	<u>9</u>			
BRADBURY	<u>✓</u>			
BURNS	<u>✓</u>			
EDMONDS	<u>✓</u>			
GIAQUINTA	<u>✓</u>			
HENRY	<u>✓</u>			
LONG	<u>✓</u>			
REDD	<u>✓</u>			
SCHMIDT	<u>✓</u>			
TALARICO	<u>✓</u>			

DATED: 10-8-91

Sandra E. Kennedy

SANDRA E. KENNEDY, CITY CLERK

Passed and adopted by the Common Council of the City of Fort Wayne, Indiana, as (ANNEXATION) (APPROPRIATION) (GENERAL) (SPECIAL) (ZONING MAP) ORDINANCE RESOLUTION NO. Q-55-91 on the 8th day of October, 1991.

Sandra E. Kennedy ATTEST
SANDRA E. KENNEDY, CITY CLERK

SEAL
Samuel J. Talarico
PRESIDING OFFICER

Presented by me to the Mayor of the City of Fort Wayne, Indiana, on the 9th day of October, 1991 at the hour of 2:00 o'clock P.M., E.S.T.

Sandra E. Kennedy
SANDRA E. KENNEDY, CITY CLERK

Approved and signed by me this 18th day of October, 1991, at the hour of 4:30 o'clock P.M., E.S.T.

Paul Helmke
PAUL HELMKE, MAYOR



STATEMENT OF BENEFITS

State Form 27167 (7-87)

Form SB-1 is prescribed by the State Board of Tax Commissioners (1987)

Confidential Statement: The records in this series are CONFIDENTIAL according to Indiana Code 6-1.1-35-9.

INSTRUCTIONS: (I.C. 6-1.1-12.1) THIS PAGE TO BE COMPLETED BY APPLICANT

1. This statement must be submitted to the body designating the economic revitalization area BEFORE a person acquires new manufacturing equipment or begins the redevelopment or rehabilitation of real property for which the person wishes to claim a deduction. Effective July 1, 1987.
2. If a person is requesting the designation of an economic revitalization area, this form must be submitted at the same time the request is submitted.
3. Approval of the designating body (City Council, Town Board, County Council, etc.) must be obtained before a deduction may be approved.
4. To obtain a deduction Form 322 ERA, Real Estate Improvements and / or Form 322 ERA / PP, New Machinery, must be filed with the county auditor. With respect to real property, Form 322 ERA must be filed by the later of (1) May 10 or (2) thirty(30) days after a notice of increase in real property assessment is received from the township assessor. Form 322 ERA / PP must be filed between March 1 and May 15 of the assessment year in which new manufacturing equipment is installed, unless a filing extension has been obtained. A person who obtains a filing extension must file the form between March 1 and June 14 of that year.

Name of Designating Body	Charles C. Vandy	County	Allen
Name of Taxpayer	Charles C. VANDY		
Address of Taxpayer (Street, city, county)	287 S. Lafayette	FT. Wayne, IN	ZIP Code 46806

SECTION I: LOCATION, COST AND DESCRIPTION OF PROPOSED PROJECT	
Location of property if different from above	Taxing District
120 ESMOND ST., FT. Wayne, IN 46806	Wayne
Cost and description of real property improvements and / or new manufacturing equipment to be acquired:	
7,000.00 wiring, plumbing, painting, interior walls, basement supporting wall between crawlspace & basement approx 23 feet	
(Attach additional sheets if needed)	Estimated Starting Date Aug 1, 91
	Estimate Completion Date Nov 1, 91

SECTION II: ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT					
Current Number	Salaries	Number Retained	Salaries	Number Additional	Salaries
self employed using contract labor as required					

SECTION III: ESTIMATE TOTAL COST AND VALUE OF PROPOSED PROJECT				
Current Values Plus estimated values of proposed project Less: Values of any property being replaced Net estimated values upon completion of project	REAL ESTATE IMPROVEMENTS		MACHINERY	
	COST	ASSESSED VALUE	COST	ASSESSED VALUE

SECTION IV: OTHER INFORMATION REQUIRED BY THE DESIGNATING BODY			
I hereby certify that the representations on this statement are true.		Signatures of Authorized Representative Charles C. Vandy	
Title Owner	Date of Signature 7/12/91	Telephone Number 745-1444	

FOR USE OF DESIGNATING BODY	
IMPACT ON THE CURRENT YEAR TAX RATE FOR THE TAXING DISTRICT INDICATED ABOVE	
Tax Rates Determined Using The Following Assumptions	Total Tax Rates
1. Current total tax rate.	\$
2. Approximate tax rate if project occurs and no deduction is granted.	\$
3. Approximate tax rate if project occurs and a deduction is assumed.	\$
Assume an 80% deduction on new machinery installed and / or a 50% deduction assumed on real estate improvements.	

We have reviewed our prior actions relating to the designation of this economic revitalization area and find that the applicant meets the general standards adopted in the resolution previously approved by this body. Said resolution, passed under IC 6-1.1-12.1-2.5, provides for the following limitations as authorized under IC 6-1.1-12.1-2:

- A) The designated area has been limited to a period of time not to exceed _____ calendar years. (See Below)
- B) The type of deduction that is allowed in the designated area is limited to:
- 1) Redevelopment or rehabilitation of real estate improvements. ☒ Yes ☐ No
 - 2) Installation of new manufacturing equipment ☐ Yes ☐ No
 - 3) No limitations on type of deduction (check if no limitations) ☐ No
- C) The amount of deduction applicable for new manufacturing equipment installed and first claimed eligible for deduction after July 1, 1987, is limited to \$ _____ cost with an \$ _____ assessed value.

Also we have reviewed the information contained in the statement of benefits including the impact on the tax rate incorporated herein, and have determined that the benefits described above can be reasonably expected to result from the project and are sufficient to justify the applicable deduction.

Approved: Signature of Authorized Member and Title

Date of Signature

Attested By:

Designated Body

If a commission council town board or county council limits the time period during which an area is an economic revitalization area, it does not limit the length of time a taxpayer is entitled to receive a deduction to a number of years designated under I.C. 6-1.1-12.1-4 or 4.5 Namely:

NEW MANUFACTURING EQUIPMENT		REDEVELOPMENT OR REHABILITATION OF REAL PROPERTY IMPROVEMENT			
		For Deductions Allowed Over A Period Of:			
Year of Deduction	Percentage	Year of Deduction	Three (3) Year Percentage	Six (6) Year Percentage	Ten (10) Year Percentage
1st	100%	1st	100%	100%	100%
2nd	95%	2nd	66%	85%	95%
3rd	80%	3rd	33%	66%	80%
4th	65%	4th		50%	65%
5th	50%	5th		34%	50%
6th and thereafter	0%	6th		17%	40%
		7th			30%
		8th			20%
		9th			10%
		10th			5%

SUMMARY SHEET AND H.A.N.D.S.,
RECOMMENDATION FOR "RESIDENTIALLY DISTRESSED AREA" IN
THE CITY OF FORT WAYNE, INDIANA

Name of Applicant Charles C. Vanyo
Site Location: 120 Esmond Street
Councilmanic District: 1 Current Zoning: R-2
Nature of Project: Tax abatement request/Designation of "Residentially
Distressed Area"

Project is located in the following:

	YES	NO
South Central Revitalization Project Area	<u>X</u>	<u> </u>
Project Renew Area	<u> </u>	<u>X</u>
City of Fort Wayne Community Development Area	<u>X</u>	<u> </u>
Flood Plain	<u> </u>	<u>X</u>
Urban Enterprise Zone	<u> </u>	<u>X</u>

Description of Project:

House is owned by County Commissioners. Through the Tax Reversion process
title will be transferred to individual who will rehabilitate the property
then rent it to low and moderate income families.

Estimated Project Cost: \$7,000.00 # of Housing Units: 1

STAFF RECOMMENDATION

As stated per the established policy of the Department of Housing
and Neighborhood Development Services, the following
recommendations are hereby made:

1. Designation as a "Residentially Distressed Area" should
be granted. Yes X No
2. Designation should be limited to a term of
2 year(s).
3. The period of deduction should be limited to
5 year(s).

COMMENTS:

None.

Staff: Barbara Jones

Date: 9/24/91

Director: Greg Russell

Date: 9/24/91

APPLICATION TO THE CITY OF FORT WAYNE, INDIANA
FOR DESIGNATION OF PROPERTY AS A
"RESIDENTIALLY DISTRESSED AREA"
AND STATEMENT OF BENEFITS

A. GENERAL INFORMATION

Applicant's Name: Charles C. Vanyo

Contact Person (if applicable): _____

Mailing Address: 2826 S. Lafayette
Ft. Wayne, In 46806

Phone Number: 745-1444

Street Address of Property Proposed to be Designated:

170 ESMOND

Real Estate Key Number of Property:

93-2113-0046

B. PROPERTY INFORMATION

Current owner of the property:

County Commissioners

If the current owner is not a unit of local government, has the property been through the county tax sale and not yet been redeemed? Explain:

was offered by HANDS and purchased by
Charles Vanyo from HANDS.

Are there buildings currently on the property? yes

If so, what type (residential/commercial, # of units, etc.)?

2 story residential

What is the condition of the building/s?

fair

Are any buildings on the property legally occupied? no

Are any buildings on the property subject to an Order to Repair or Demolish or other action by the Department of Neighborhood Code Enforcement? on 12-12-90 Order No 90-49538
by dept of Neighborhood Code Enforcement was notice of
non compliance and in violation of 13-231, 12-049,
13-070 and 15-130

C. PROJECT SUMMARY INFORMATION

Will this project include:

New construction

Rehabilitation X

How many dwelling units will be built/rehabilitated? 1

Will these units be:

Single family 1

Two-family

Three-family

Four-family

Over four units per dwelling?

For owner-occupancy?

For rental? 1

What is the estimated total cost of the project? 7,000.00

What is the estimated cost per unit?

What is the estimated sale price per unit (if for owner-occupancy)?

What is the estimated rent per unit (if for rental)?

250 to 300 per month

What other types of assistance will be provided to owners or renters (such as down payment assistance, Section 8 subsidies, etc.)?

Would be placed on Section 8

	YES	NO
Is the project site solely within the city limits of Fort Wayne?	<u>X</u>	<u> </u>
Is the project site within the floodplain?	<u> </u>	<u>X</u>
Will the project require public improvements?	<u> </u>	<u>X</u>
Sewer lines (not sewer hook-ups)	<u> </u>	<u> </u>
Water lines (not water hook-ups)	<u> </u>	<u> </u>
Road improvements (on right-of-way)	<u> </u>	<u> </u>
Other	<u> </u>	<u> </u>

D. ZONING INFORMATION

What is the existing zoning classification of the project site? residential

What zoning classification does the project require? None

E. REAL ESTATE TAX INFORMATION

What is the current assessed value of the real estate?

Land \$ 470

Improvements \$ 2830

Total \$ 3300

In what township is the project site located? Wayne

F. UNDESIRABILITY OF NORMAL DEVELOPMENT

What evidence can be provided that the property on which the project will be located "has become undesirable for, or impossible of, normal development and occupancy because of a lack of development, cessation of growth, deterioration of improvements or character of occupancy, age, obsolescence, substandard buildings, or other factors which have impaired values or prevent a normal development of property or use of property"?

I hereby certify that the information and representation on this application and attached exhibits are true and complete. Further, it is hereby certified that no building permit has been issued for construction of improvements as of the date of filing of this application.

Charles C. Vongph
Signature of Applicant

7-12-91
Date

Attachments: Form SB-1
 Form 322 ERA



APPLICATION FOR DEDUCTION FROM ASSESSED VALUATION OF STRUCTURES IN ECONOMIC REVITALIZATION AREAS

State Form 18379 (R/1-88)

- INSTRUCTIONS:**
1. This form is to be filed in person or by mail with the Auditor of the county in which the property is located before May 10 of the year in which addition to assessed valuation for new assessment is made, or not later than 130 days after mailing date of notice of assessment (Form 11) if such notice is not given before April 10 of that year.
 2. Copy of Form-11 must be attached.
 - A property owner may not receive this deduction for the same repairs or improvements for which a deduction is obtained under either I.C. 6-1.1-12-18 or I.C. 6-1.1-12-22.
 4. A copy of the statement of benefits or a benefit performance waiver must be attached to this application.
 5. Taxpayer completes Sections I, II and III below.

QUALIFICATIONS: This property tax deduction is only available for property within an area which the Metropolitan Development Commission, Common or City Council, Town Board or County Council designated as an economic revitalization area (ERA) (I.C. 6-1.1-12-2). Effective July 1, 1987 for applications filed after December 31, 1987 an applicant who wishes to claim a deduction or request designation of an (ERA) area must file a statement of benefits (State Form 27167) to the appropriate designating body. At the time of filing for the designation of an ERA, a taxpayer must file the statement of benefits. A taxpayer who does not apply for the designation of an ERA must file the statement of benefits before beginning the redevelopment or rehabilitation for which this application is made. Except for deductions related to redevelopment or rehabilitation initiated before December 31, 1987, in ERA's designated before that date, a deduction for redevelopment or rehabilitation is not authorized for the following facilities:

- (1) Private or commercial golf course
- (2) Country club
- (3) Massage parlor
- (4) Tennis court
- (5) Skating facility including roller skating, skateboarding, or ice skating.
- (6) Raquet sport facility (including handball or raquet ball court)
- (7) Hot tub facility
- (8) Suntan facility
- (9) Racetrack
- (10) Any facility the primary purpose of which is (a) Retail food and beverage service; (b) Automobile sales or service; or (c) other retail; (unless the facility is located in an economic development target area established under I.C. 6-1.1-12.1-7.)
- (11) Residential, unless the facility is a multi-family facility that contains at least 20% of the units available for use by low and moderate income individuals or unless the facility is located in an economic development target area established under I.C. 6-1.1-12.1-7.

I DESCRIPTION OF PROPERTY

The owner hereby applies to the County Auditor for a deduction pursuant to I.C. 6-1.1-12.1-5 beginning with the assessment date March 1, 19 ____.

County	Albany	Township	Wayne	Taxing District	Key Number
Name of Owner	Charles C. VANVO			93-2113-0046	
Property Address (Street, number, city, state and ZIP code)	120 Esmond St., Ft. Wayne, In 46806				
Legal Description from Form 11	W 45 Lot 46 BASS 6th ADD.				
Type of Structure	Residential 1.5 story 967 Sq. Ft 3 B.R. total 7 rooms				Date of Form 11
Governing body that approved ERA designation					Use of Structure
					Residential
					Resolution Number
Is ERA designation approved (must be before March 1).	Benefit performance waiver was issued:				
	<input type="checkbox"/> Yes <input type="checkbox"/> NO				

II VERIFICATION OF OWNER OR REPRESENTATIVE

Signature of Owner or Representative (I hereby certify that the representations on this application are true.)	Date of Signature
Charles C. Vanvo	7/12/91
Address (Street, number, city and state)	ZIP Code
2826 S Lafayette Ft. Wayne, In	46806

III STRUCTURES

Rehabilitation Structure		AUDITOR'S USE
Assessed valuation AFTER rehabilitation	\$	
Assessed valuation BEFORE rehabilitation	\$	
INCREASE in assessed valuation	\$	
Assessed valuation eligible for deduction	\$	
Structure 1. Assessed valuation	\$	
2. Assessed valuation eligible for deduction	\$	

IV VERIFICATION OF TOWNSHIP (OR TRUSTEE) ASSESSOR

I certify that the above described structure was assessed and the owner was notified		
with the effective date of the assessment being March 1, 19 ____ and that the assessed valuation in Sec. III are correct.		
Name of Township (or Trustee) Assessor	Township	Date

V PERCENTAGES AND AMOUNTS

YEAR OF DEDUCTION / PERCENTAGE / AMOUNT OF DEDUCTION

YEAR OF DEDUCTION / PERCENTAGE / AMOUNT OF DEDUCTION

(1) For deductions allowed over a three (3) year period:

(3) For deductions allowed over a ten (10) year period:

1st _____ pay _____ 100% \$ _____

1st _____ pay _____ 100% \$ _____

2nd _____ pay _____ 66% \$ _____

2nd _____ pay _____ 95% \$ _____

3rd _____ pay _____ 33% \$ _____

3rd _____ pay _____ 80% \$ _____

(2) For deduction allowed over a six (6) year period:

4th _____ pay _____ 65% \$ _____

1st _____ pay _____ 100% \$ _____

5th _____ pay _____ 50% \$ _____

2nd _____ pay _____ 85% \$ _____

6th _____ pay _____ 40% \$ _____

3rd _____ pay _____ 66% \$ _____

7th _____ pay _____ 30% \$ _____

4th _____ pay _____ 50% \$ _____

8th _____ pay _____ 20% \$ _____

5th _____ pay _____ 34% \$ _____

9th _____ pay _____ 10% \$ _____

6th _____ pay _____ 17% \$ _____

10th _____ pay _____ 5% \$ _____

VI APPROVAL OF COUNTY AUDITOR (COMPLETE ONLY IF APPROVED)

This application is approved in the amounts shown in Section V above.

Signature of County Auditor

Date



MEMORANDUM

TO: City Council Members

FROM: Barbara L. Jones, Administrator, H.A.N.D.S., Inc. *BG/ys*

SUBJECT: Tax Abatement Application

DATE: October 1, 1991

Background

This house is owned by the County Commissioners. Through the Tax Reversion process, title will be transferred to Charles C. Vanyo. Mr. Vanyo has demonstrated the financial capability to correct all substandard conditions in the property. The house will be rehabilitated and rented to low-moderate income families. Tax abatement will decrease annual operating costs and consequently, the owners will be able to keep the rent affordable to low and moderate income families.

Reviewing alternatives

If the tax abatement is not granted, some low and moderate income tenants will be unable to afford the rents after rehabilitation.

Recommendation

Staff recommends declaration and confirmation of the site located at 120 Esmond Street as a Residentially Distressed Area to allow tax abatement.

ys

Admn. Appr. _____

DIGEST SHEET

TITLE OF ORDINANCE Designation of "Residentially Distressed Area"
Tax abatement for property located at 120 Esmond Street.

DEPARTMENT REQUESTING ORDINANCE Housing and Neighborhood Development
Services, Inc.

SYNOPSIS OF ORDINANCE This house is owned by the County Commissioners.
Through the tax reversion process, title will be transferred to an individual
who will rehabilitate the property and rent to low and moderate income tenants.
If the location is designated a "Residentially Distressed Area" the property
may be eligible for tax abatement thereby decreasing annual operating costs
and consequently, keeping the rents affordable to low and moderate income
families.

Q-91-10-08

EFFECT OF PASSAGE The prospective owner intends to rehabilitate the property.
Tax abatement will decrease the annual operating costs and consequently the owner
will be able to keep the rent affordable to low and moderate income families.

EFFECT OF NON-PASSAGE Some low and moderate income tenants will be unable
to afford the rents after rehabilitation.

MONEY INVOLVED (Direct Cost, Expenditures, Savings) _____

ASSIGNED TO COMMITTEE (PRESIDENT) _____

BILL NO. R-91-10-08

REPORT OF THE COMMITTEE ON FINANCE

MARK E. GIAQUINTA, CHAIRMAN
DONALD J. SCHMIDT, VICE CHAIRMAN
BRADBURY, REDD, BURNS

WE, YOUR COMMITTEE ON FINANCE TO WHOM WAS

REFERRED AN (~~ORDINANCE~~) (RESOLUTION) designating a
"Residentially Distressed Area" under I.C. 6-1.1-12-1 for
property commonly known as 120 Esmond Street

HAVE HAD SAID (~~ORDINANCE~~) (RESOLUTION) UNDER CONSIDERATION
AND BEG LEAVE TO REPORT BACK TO THE COMMON COUNCIL THAT SAID
(~~ORDINANCE~~) (RESOLUTION) _____

DO PASS

DO NOT PASS

ABSTAIN

NO REC

Mark E. Giaquinta

Donald J. Schmidt

Bradbury, Redd, Burns

Don Schmidt

DATED: 10-8-91.

Sandra E. Kennedy
City Clerk